

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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PUBLIC RECORDS

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Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Ayotte Majority Committee

ADDRESS (number and street)

228 S. Washington Street

☐ (Check if address is changed)

Suite 115

Alexandria

CITY ▲

VA

STATE ▲

22314

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

kdavis@hdapec.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

08

30

2016

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Keith A. Davis

Signature of Treasurer

*Keith A. Davis*

Date

08

30

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
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Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

201609020200372428

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☒ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

- |    |                             |               |             |
|----|-----------------------------|---------------|-------------|
| 1. | FRIENDS OF KELLY AYOTTE INC | FEC ID number | C C00464297 |
| 2. | NRSC                        | FEC ID number | C C00027466 |
| 3. |                             | FEC ID number | C           |
| 4. |                             | FEC ID number | C           |

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Write or Type Committee Name

## Ayotte Majority Committee

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Keith A. Davis

Mailing Address

228 S. Washington Street

Suite 115

Alexandria

VA

22314

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

703

549

7705

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

Keith A. Davis

Mailing Address

228 S. Washington Street

Suite 115

Alexandria

VA

22314

Title or Position

Treasurer

CITY

STATE

ZIP CODE

Telephone number

703

549

7705

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Full Name of Designated Agent Lisa R. Lisker

Mailing Address 228 S. Washington Street  
Suite 115  
Alexandria VA 22314  
CITY STATE ZIP CODE

Title or Position Assistant Treasurer Telephone number 703 - 549 - 7705

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BB&T

Mailing Address 1909 K Street NW  
Washington DC 20006  
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address  
CITY STATE ZIP CODE

201609020200372431



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ORIGIN ID: NDVA (703) 549-7705  
KEITH DAVIS  
HUCKABY DAVIS LISKER  
228 S WASHINGTON ST  
STE 115  
ALEXANDRIA, VA 22314  
UNITED STATES US

SHIP DATE: 30  
ACTWGT: 0.10  
CAD: 1043151

BILL SENDER

TO OFFICE OF SECRETARY OF THE SENA  
OFFICE OF SECRETARY OF THE SENA  
232 HART SENATE BUILDING

WASHINGTON DC 20510

(202) 224-0758  
INV:  
PO:

REF: AYOTTE MAJORITY

DEPT:

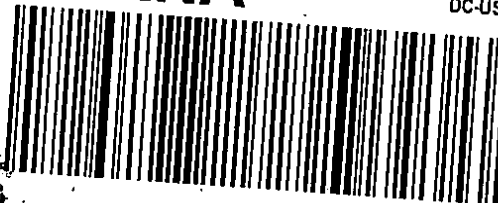


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# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt Postmark

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Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

## OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<b>8-30-16</b>	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX \_\_\_\_\_  
Date of Receipt

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Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **9-2-16**

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